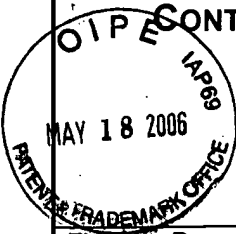


05-19-06

RCE



REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

ADDRESS TO:
MAIL STOP RCE
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/405,046
Filing Date	September 27, 1999
First Named Inventor	Meade
Group Art Unit	1616
Examiner Name	Jones, D.L.
Attorney Docket No.	A-58634-6 468081-46

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-captioned application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application

US Express Mail Receipt No. EV 695994310

Mailed: May 18, 2006

1. Submission required under 37 C.F.R. § 1.114

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered.)
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other: _____
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (including Form PTO-1449 and References)
- iv. ☒ Other: **Petition for Five Month Extension of Time**

2. Miscellaneous

- a. ☐ Suspension of action on the above-captioned application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed three months; Fee under 37 C.F.R. § 1.17(i) required.)
- b. ☐ Other: _____

3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

- a. ☒ The Fees are calculated as follows:
- | | AMOUNT | <input type="checkbox"/> Large Entity | <input checked="" type="checkbox"/> Small Entity |
|--|------------|---|--|
| i. <input checked="" type="checkbox"/> RCE BASIC FEE | \$ 395.00 | \$ 790.00 | \$ 395.00 |
| ii. <input checked="" type="checkbox"/> EXTENSION FEES | \$ 1080.00 | One-Month \$ 120.00
Two-Month 450.00
Three-Month 1,020.00
Four-Month 1,590.00
Five-Month 2,160.00 | \$ 60.00
225.00
510.00
795.00
1,080.00 |
| iii. <input type="checkbox"/> OTHER () | \$ | \$ | \$ |
- b. ☒ Check in the amount of \$ **1475.00** is enclosed. The Commissioner is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to **Deposit Account No. 50-2319**.
- c. ☐ The Commissioner is hereby authorized to charge the fees as indicated above, charge any variance or credit any overpayments, to **Deposit Account No. 50-2319**.

05/22/2006 FFANAEIA 00000027 09405046

01 FC:2801 395.00 OP

SUBMITTED BY

Complete (if applicable)

Typed or Printed Name **Robin M. Silva, Reg. No. 38,304**

Registration No. **54,552**

Signature

Date

May 18, 2006

(Updated 10/05)

4827-3955-4049\15/16/2006 2:49 PM

05/22/2006 FFANAEIA 00000027 09405046

01 FC:2801 395.00 OP